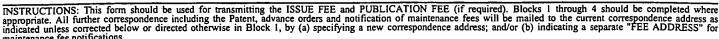
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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701444	590 01/09/2004			papers. Each addition	nal paper, such as an assignment ate of mailing or transmission.	nt or formal drawing, must
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	· ·	\'æ'.	CECTO .			(Signature)
RADENARY				(Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED INVI		ITOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/543,782	04/06/2000	D. Zucker-Fran		n	ZUCKER-FRANKLIN=1A	8307
TITLE OF INVENTION: A	SSAYS FOR HUMAN T CI	ELL LYMPHOTROI	PHIC VIRUS TYPI	ES I AND II		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	Pt	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$300	\$965	04/09/2004
EXAMINER		ART UNIT	CI	LASS-SUBCLASS		•
STRZELECK	1637		435-006000		•	
CFR 1.363). Change of corresponde Address form PTO/SB/12 "Fee Address" indicati PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND	on (or "Fee Address" Indicated or more recent) attached. Use RESIDENCE DATA TO B an assignee is identified beld to the USPTO or is being s	correspondence ion form of a Customer E PRINTED ON TH ow, no assignee date ubmitted under separ	names of up to agents OR, altern firm (having as a agent) and the na attorneys or agent will be printed. E PATENT (print of a will appear on the rate cover. Complete	e patent. Inclusion of tion of this form is NO Y and STATE OR CO	attorneys or e of a single d attorney or stered patent ed, no name 3 assignee data is only appropriat or a substitute for filing an assign	te when an assignment has
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